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45557 7590 01/08/2009

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**IBM CORPORATION (JSS)**  
**C/O SCHUBERT OSTERRIEDER & NICKELSON PLLC**  
**6013 CANNON MOUNTAIN DRIVE, S14**  
**AUSTIN, TX 78749**

Grant R. Clayton,  
 Clayton, Howarth & Cannon, P.C.  
 P.O. Box 1909 Sandy, UT 84091

(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/710,959 08/14/2004 Scott L. Nielson 4958

TITLE OF INVENTION: A METHOD, PROCESS AND COMPUTER PROGRAM TO AUTOMATICALLY CREATE A CUSTOMIZED THREE-DIMENSIONAL NAIL OBJECT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$300	\$0	\$1055	04/08/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
FREJD, RUSSELL WARREN	2128	703-006000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Clayton,

- 1 \_\_\_\_\_
- 2 Howarth &
- 3 Cannon, P.C.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

American Equities Management, LLC

South Lake, Texas

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
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- ☒ Advance Order - # of Copies 10

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- ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number \_\_\_\_\_ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date

Typed or printed name Grant R. Clayton

Registration No. 32,462

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